

PTO/SSAB (08-03)

Approved for use through 07/31/2006. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: Cranium CorporationApplication No./Patent No.: 6,303,882 Filed/Issue Date: October 16, 2001Entitled: LOAD CELL APPARATUS AND METHODCranium Corporation a Texas corporation  
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1.  the assignee of the entire right, title, and interest; or2.  an assignee of less than the entire right, title and interest.  
The extent (by percentage) of its ownership interest is \_\_\_\_\_ %  
in the patent application/patent identified above by virtue of either:A.  An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 01062, Frame 0756, or for which a copy thereof is attached.

OR

B.  A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:1. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.2. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.3. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached. Additional documents in the chain of title are listed on a supplemental sheet. Copies of assignments or other documents in the chain of title are attached.  
(NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08)

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

10/14/03  
Date  
512-444-1050

Telephone number

Stephen J. Cochran

Typed or printed name

Stephen J. Cochran

Signature

President

Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. Including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Office Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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OCT-14-2003 TUE 10:04 AM SHAFFER&CULBERTSON

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P. 05

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GPO: 2003-0000  
Information contained herein is subject to change. A recent GPO control number  
is 2003-0000.

REISSUE APPLICATION DECLARATION BY THE ASSIGNEE		Docket Number (optional) 101-881																																				
<p>I hereby declare that:</p> <p>The residence, mailing address and citizenship of the inventors are stated below.</p> <p>I am authorized to act on behalf of the following assignee: <u>Cranium Corporation</u></p> <p>and the title of my position with said assignee is: <u>President</u></p> <p>The entire title to the patent identified below is vested in said assignee.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Inventor</td> <td style="width: 50%;">Thomas W. Stephens</td> <td style="width: 50%;">Citizenship</td> <td style="width: 50%;">US</td> </tr> <tr> <td>Residence/Mailing Address</td> <td colspan="3">4300 E. Whitestone Blvd., Leander, Texas 78641</td> </tr> <tr> <td>Inventor</td> <td>Donald R. Zrudeky</td> <td>Citizenship</td> <td>US</td> </tr> <tr> <td>Residence/Mailing Address</td> <td colspan="3">187 River Road, Liberty Hill, Texas 78642</td> </tr> <tr> <td colspan="4"> <input checked="" type="checkbox"/> Additional inventors are named on separately numbered sheets attached hereto.         </td> </tr> <tr> <td>Patent Number</td> <td>6,303,882</td> <td>Date of Patent Issued</td> <td>October 16, 2001</td> </tr> <tr> <td colspan="4">Title of Invention <b>LOAD CELL APPARATUS AND METHOD</b></td> </tr> <tr> <td colspan="4"> <p>I believe said inventor(s) to be the original and first inventor(s) of the subject matter which is described and claimed in said patent, for which a reissue patent is sought on the invention entitled:</p> <hr/> <p>the specification of which</p> <p><input checked="" type="checkbox"/> is attached hereto.</p> <p><input type="checkbox"/> was filed on _____ as reissue application number _____ / _____</p> <p>and was amended on _____ (if applicable)</p> </td> </tr> <tr> <td colspan="4"> <p>I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.</p> <p>I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.</p> <p><input type="checkbox"/> I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b). Attached is form PTO/SB/028 (or equivalent) listing the foreign applications.</p> <p>I verify below the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)</p> <p><input type="checkbox"/> by reason of a defective specification or drawing.</p> <p><input checked="" type="checkbox"/> by reason of the patentee claiming more or less than he had the right to claim in the patent.</p> <p><input type="checkbox"/> by reason of other errors.</p> </td> </tr> </table>			Inventor	Thomas W. Stephens	Citizenship	US	Residence/Mailing Address	4300 E. Whitestone Blvd., Leander, Texas 78641			Inventor	Donald R. Zrudeky	Citizenship	US	Residence/Mailing Address	187 River Road, Liberty Hill, Texas 78642			<input checked="" type="checkbox"/> Additional inventors are named on separately numbered sheets attached hereto.				Patent Number	6,303,882	Date of Patent Issued	October 16, 2001	Title of Invention <b>LOAD CELL APPARATUS AND METHOD</b>				<p>I believe said inventor(s) to be the original and first inventor(s) of the subject matter which is described and claimed in said patent, for which a reissue patent is sought on the invention entitled:</p> <hr/> <p>the specification of which</p> <p><input checked="" type="checkbox"/> is attached hereto.</p> <p><input type="checkbox"/> was filed on _____ as reissue application number _____ / _____</p> <p>and was amended on _____ (if applicable)</p>				<p>I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.</p> <p>I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.</p> <p><input type="checkbox"/> I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b). Attached is form PTO/SB/028 (or equivalent) listing the foreign applications.</p> <p>I verify below the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)</p> <p><input type="checkbox"/> by reason of a defective specification or drawing.</p> <p><input checked="" type="checkbox"/> by reason of the patentee claiming more or less than he had the right to claim in the patent.</p> <p><input type="checkbox"/> by reason of other errors.</p>			
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[Page 1 of 2]  
This collection of information is required by 37 CFR 1.176. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEE 37 CFR 1.4(a).  
ADDRESS: **REDDEN TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

If you need assistance in completing the form, call 1-800-270-2189 and select option 2.

▼ OCT-14-2003 TUE 10:05 AM SHAFFER&amp;CULBERTSON

FAX NO. 850 934 4143

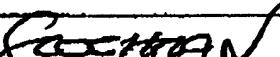
P. 06

PTD/85452 (07-03)

Approved for use through 01/31/2004, GAMS 0881-0033

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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<b>REISSUE APPLICATION DECLARATION BY THE ASSIGNEE</b>		Docket Number (Optional) 101-881																																				
At least one error upon which reissue is based is described as follows:  Less was claimed than was allowable.																																						
{Attach additional sheets, if needed.}																																						
All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.																																						
I hereby appoint:																																						
<input type="checkbox"/> Practitioners at Customer Number: <input type="text"/> <p>OR</p> <input checked="" type="checkbox"/> Practitioner(s) named below:																																						
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: center;">Name</th> <th style="text-align: center;">Registration Number</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">J. Nevin Shaffer, Jr.</td> <td style="text-align: center;">29,858</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> </tr> </tbody> </table>			Name	Registration Number	J. Nevin Shaffer, Jr.	29,858																																
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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.																																						
Correspondence Address: Direct all communications about the application to:																																						
<input type="checkbox"/> Customer Number: <input type="text"/> <p>OR</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 20%;"><input checked="" type="checkbox"/> Firm or Individual Name</td> <td colspan="5">Shaffer &amp; Culbertson</td> </tr> <tr> <td>Address</td> <td colspan="5">913 Gulf Breeze Parkway</td> </tr> <tr> <td>Address</td> <td colspan="5">Suite 43</td> </tr> <tr> <td>City</td> <td>Gulf Breeze</td> <td>State</td> <td>Florida</td> <td>Zip</td> <td>32581</td> </tr> <tr> <td>Country</td> <td colspan="5">US</td> </tr> <tr> <td>Telephone</td> <td>850-934-4124</td> <td>Fax</td> <td colspan="3">850-934-4143</td> </tr> </table>			<input checked="" type="checkbox"/> Firm or Individual Name	Shaffer & Culbertson					Address	913 Gulf Breeze Parkway					Address	Suite 43					City	Gulf Breeze	State	Florida	Zip	32581	Country	US					Telephone	850-934-4124	Fax	850-934-4143		
<input checked="" type="checkbox"/> Firm or Individual Name	Shaffer & Culbertson																																					
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Country	US																																					
Telephone	850-934-4124	Fax	850-934-4143																																			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.																																						
Full name of person signing (given name, family name) <b>Stephen J. Cochran</b>																																						
Signature 		Date <b>10/14/03</b>																																				
Address of Assignee Cramton Corporation, 1505 Cliffside Drive, Austin, Texas 78704																																						

OCT-14-2003 TUE 10:03 AM SHAFFER&amp;CULBERTSON

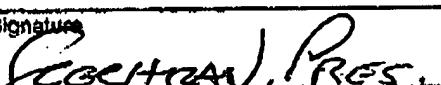
FAX NO. 850 934 4143

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PTO/SB/55 (05-03)

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<b>REISSUE APPLICATION: CONSENT OF ASSIGNEE; STATEMENT OF NON-ASSIGNMENT</b>		Docket Number (Optional) 101-881
This is part of the application for a reissue patent based on the original patent identified below.		
Name of Patentee(s) Thomas W. Stephens and Donald R. Zrudsky		
Patent Number 6,303,882	Date Patent Issued October 16, 2001	
Title of Invention LOAD CELL APPARATUS AND METHOD		
<p>1. <input checked="" type="checkbox"/> Filed herein is a statement under 37 CFR 3.73(b). (Form PTO/SB/96)</p> <p>2. <input type="checkbox"/> Ownership of the patent is in the inventor(s), and no assignment of the patent is in effect.</p>		
<p>One of boxes 1 or 2 above must be checked. If multiple assignees, complete this form for each assignee. If box 2 is checked, skip the next entry and go directly to "Name of Assignee".</p> <p>The written consent of all assignees and inventors owning an undivided interest in the original patent is included in this application for reissue.</p>		
<p>The assignee(s) owning an undivided interest in said original patent is/are <u>Cranium Corporation</u>, and the assignee(s) consents to the accompanying application for reissue.</p>		
Name of assignee/inventor (if not assigned)		
Signature 	Date <u>10-14-03</u>	
Typed or printed name and title of person signing for assignee (if assigned)		
Stephen J. Cochran, President		

This collection of information is required by 37 CFR 1.172. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/81 (02-01)

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**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

Application Number	09/523,385
Filing Date	March 10, 2000
First Named Inventor	Thomas W. Stephens et al.
Title	Load Cell Apparatus and Method
Group Art Unit	2859
Examiner Name	R. Gibson
Attorney Docket Number	101-881

I hereby appoint:

Practitioners at Customer Number  → Place Customer Number Bar Code Label here

OR

Practitioner(s) named below:

Name	Registration Number
J. Nevin Shaffer, Jr.	28,858

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

OR

Practitioners at Customer Number  → Place Customer Number Bar Code Label here

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Shaffer & Culbertson				
Address	813 Gulf Breeze Parkway				
Address	Suite 43				
City	Gulf Breeze	State	Florida	Zip	32561
Country	United States				
Telephone	850-934-4124	Fax	850-934-4143		

I am the:

Applicant/inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/88).

SIGNATURE of Applicant or Assignee of Record

Name Signature Date 

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of 1 forms are submitted.

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